9 11 32 33

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

JAB-1751CON 2

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
(Column 1) (Column 2)								TYPE [OR		ENTITY
TOTAL CLAIMS			36					. RATE	FEE	7	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
T	OTAL CHARGE	ABLE CLAIMS	36 minus 20=		* 16			X\$ 9=		OR	X\$18=	
IN	DEPENDENT C	CLAIMS	6 minus 3 =		* 3			X43=	· -	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=	†	OR		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1316	
CLAIMS AS AMENDED - PART II									<u> </u>		•	
_	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	S ITE		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u>.</u>	=		X43=		OR	X86=	
<u> </u>	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			. 1 45			.200-	
							٠ [+145=		OR	+290=	
							A	DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	, 	(Colum		(Column 3)	1					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	r	X43=	- ;		X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H	7,10-		OR		
								+145=		OR	+290=	• 1
							AI	TOTAL DDIT, FEE		OR ,	TOTAL ODIT, FEE	
		(Column 1)	(Column 3)									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMBI PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	[RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	\vdash	X43=				
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash	A-0=	i	OR	X86=	
. 14	Ab						.	+145=		OR	+290=	
** 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR .	TOTAL DDIT. FEE	
	ure mignest Nur	noer Previously Pai	a FOR IN THIS	SPACE is I	ess than	3, enter *3.* nighest number :		DIT. FEE L				